



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Samuel Schindler
SERIAL NO.: 09/726,736
FILING DATE: November 29, 2000
TITLE: SEMICONDUCTOR MOUNTING APPARATUS WITH A CHIP
GRIPPER TRAVELLING BACK AND FORTH
EXAMINER: Chang, Rick Kiltae
ART UNIT: 3729

CERTIFICATE OF MAILING

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Date: 3/31/04

Name: Beatrice Orozco

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AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

This paper is responsive to the Office Action dated December 31, 2003. Please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks / Arguments begin on page 11 of this paper.

An Attachment which provides reference numerals, begins on page 18 of this paper.



3729

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/726,736
	Filing Date	November 29, 2000
	First Named Inventor	Samuel Schindler
	Art Unit	3729
	Examiner Name	Rick Kiltae
Total Number of Pages in This Submission	Attorney Docket Number	ESEC-P32US-D1

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Revocation of Attorney and Power of Attorney, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		RECEIVED APR - 8 2004 TECHNOLOGY CENTER 3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David B. Ritchie, Reg. No. 31,562
Signature	
Date	3-31-2004

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